

APPLICATION FOR A BUENA VISTA SPECIAL EVENT LICENSE

1. Name of Business: _____
2. Owner(s) Name: _____
3. Permanent Address: _____

4. Mailing address (If different from above): _____

5. Local Address (if applicable): _____

6. Place of Business (full address): _____

7. Telephone No.: _____ 8. State Sales Tax Acct. No. _____
8. Principal Goods or Service Provided: _____

9. Does the business handle or sell food items? _____ **If yes, submit written approval from the Chaffee County Environmental Health Department.**
10. Specific dates business is to be conducted in Buena Vista: _____
11. Vehicle description and plate number: _____
12. Vehicle Identification Number: _____
13. Name and Drivers License Information of Vehicle Operator: _____

14. If you have ever been convicted of any crime, including misdemeanors and violations of municipal ordinances, other than traffic violations, please describe and include the jurisdiction and nature of the offense and penalty imposed: _____

I declare, under the penalty of perjury, that this application has been examined by me; that the statements made herein are made in good faith pursuant to applicable tax laws and regulations, and to the best of my knowledge and belief, are true, correct, and complete.

Signature of Applicant _____ Date: _____

Title: _____

The Buena Vista Special Event License is \$12.00. Make check payable to the "Town of Buena Vista." Thank you.

Please mail completed application and fee to:

Town of Buena Vista
PO Box 2002
Buena Vista, CO 81211

Questions? Call (719) 395-8643 ext. 10

For Office Use Only

License No. _____
Date mailed: _____